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UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. 500.42907PX1	
		First Inventor OKUMURA, TAKEFUMI	
		Title LITHIUM SECONDARY BATTERY	
(Only for new nonprovisional applications under 37 CFR 1.53(b))		Express Mail Label No.	

APPLICATION ELEMENTS

SEE MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)

2. ☐ Applicant claims small entity status.
See 37 CFR 1.27.

3. ☒ Specification [Total Pages: **59**]
(preferred arrangement set forth below)

- Descriptive title of the invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets: **1**]

5. Oath or Declaration [Total Sheets: **8**]

a. ☒ Newly executed (original or copy)

b. ☐ Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)

i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
Named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)

6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)

a. ☐ Computer Readable Form (CRF)

b. Specification Sequence Listing on:

i. ☐ CD-ROM or CD-R (2 copies); or

ii. ☐ paper

c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☒ Assignment Papers (cover sheet & documents(s))

10. ☐ 37 CFR 3.73(b) Statement ☒ Power of Attorney
(when there is an assignee)

11. ☐ English Translation Document (if applicable)

12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations

13. ☐ Preliminary Amendment

14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)

15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)

16. ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.

17. ☒ Other: **Figure 1: Credit Card Payment Form**

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☒ Continuation-in-part (CIP) of prior application No.: **10/623,497**

Prior application information: Examiner: _____ Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☒ Customer Number **020457** OR ☐ Correspondence address below

Name ANTONELLI, TERRY, STOUT & KRAUS, LLP			
Address			
City	State	Zip Code	
Country	Telephone	Fax	
Name (Print/Type) Alan E. Schiavelli		Registration No. (Attorney/Agent) 32,087	
Signature		Date	November 20, 2003

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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 22386 U.S. PTO
10/7/17646

112103

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**FEE TRANSMITTAL
for FY 2004**

Effective 10/01/2003. Patent fees are subject to annual revision.

Complete if Known

Application Number _____
 Filing Date **November 21, 2003**
 First Named Inventor **OKUMURA, TAKEFUMI**
 Examiner Name _____

☐ Applicant claims small entity status. See 37 CFR 1.27

Art Unit _____

TOTAL AMOUNT OF PAYMENT **(\$)** 810.00Attorney Docket No. **500.42907PX1****METHOD OF PAYMENT (check all that apply)**☐ Check ☒ Credit Card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:

Deposit

Account

Number

01-2135

Deposit

Account

Name

Antonelli, Terry, Stout & Kraus, LLP

The Director is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) during the pendency of this application.☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code	Entity Fee (\$)	Small Entity Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	770
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1)

770

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fee from below	Fee Paid
Total Claims	10	-20** = 0	x 18.00 = 0.00
Indep. Claims	2	-3** = 0	x 86.00 = 0.00
Multiple Dependent		290.00	= 0.00

Large Entity Fee Code

Small Entity Fee Code

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SUBTOTAL (2) \$0.00

**or number previously paid, if greater; For Reissues, see above.

3. ADDITIONAL FEES

Large Entity Fee Code

Small Entity Fee Code

Fee (\$)

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Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

40.00

Fee Paid

40.00

40.00

SUBMITTED BY**Complete (if applicable)**

Name (Print/Type)

Alan E. Schievelli

Registration No.
(Attorney/Agent)

32,087

Telephone

703-312-6600

Signature

Date

11/21/03

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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